

Austin Lobby Quarterly Activity Report Cover Sheet

FORM QAR
COVER SHEET

1 LOBBYIST NAME	TITLE; FIRST; MI Alfred L.	PAGE # 15
	LAST; SUFFIX Bingham Jr.	ACCOUNT # 00090617
2 EMPLOYING ENTITY	Entity/Organization Name	OFFICE USE ONLY
3 LOBBYIST PERMANENT BUSINESS STREET ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1212 Guadalupe St., Apt 804 Austin, TX 78701	Date Received ELECTRONICALLY FILED 07/16/2021
		Receipt #
		HD / PM Amount
		Date Processed
4 LOBBYIST BUSINESS MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1212 Guadalupe St., Apt 804 Austin, TX 78701	Date Imaged

5 LOBBYIST REGISTERED UNDER BUSINESS ENTITY

Austin Lobby Quarterly Activity Report Municipal

FORM QAR SCHEDULE Municipal Question

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipal Question: Sch: 1/1 Rpt: 2/15
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4 MUNICIPAL QUESTION	Government and Public Affairs
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5 MUNICIPAL QUESTION PERTAINING TO REAL PROPERTY	The municipal question pertain to real property
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6 REAL PROPERTY	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP
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7 PROPERTY DESCRIPTION	
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SUBJECT MATTER CATEGORIES

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> 1 Accessibility or Persons with Disabilities | <input checked="" type="checkbox"/> 14 Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> 26 Permits (Building, Site Plans) |
| <input checked="" type="checkbox"/> 2 Affordability | <input checked="" type="checkbox"/> 15 Finance, Budget, or Investments | <input type="checkbox"/> 27 Permits (Other) |
| <input type="checkbox"/> 3 Animals | <input checked="" type="checkbox"/> 16 Health, Healthcare, Mental Health, or Human Services | <input checked="" type="checkbox"/> 28 Public Safety, Police, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> 4 Annexation | <input type="checkbox"/> 17 Historic Preservation | <input type="checkbox"/> 29 Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> 5 Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> 18 Hospitality, Tourism, Events, or Convention Center | <input checked="" type="checkbox"/> 30 Quality of Life Affairs |
| <input checked="" type="checkbox"/> 6 Aviation | <input type="checkbox"/> 19 Human Rights or Immigration | <input checked="" type="checkbox"/> 31 Real Estate |
| <input checked="" type="checkbox"/> 7 City Infrastructure or Public Works | <input checked="" type="checkbox"/> 20 Labor or Workforce | <input checked="" type="checkbox"/> 32 Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> 8 Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> 21 Land Development or Land Use | <input checked="" type="checkbox"/> 33 Taxation or Fees |
| <input type="checkbox"/> 9 Code Compliance | <input type="checkbox"/> 22 Municipal Court | <input checked="" type="checkbox"/> 34 Technology or Communications |
| <input checked="" type="checkbox"/> 10 Construction | <input type="checkbox"/> 23 Municipal Legislation | <input checked="" type="checkbox"/> 35 Transportation or Mobility |
| <input checked="" type="checkbox"/> 11 Contracts or Procurement | <input checked="" type="checkbox"/> 24 Neighborhoods | <input checked="" type="checkbox"/> 36 Zoning or Platting |
| <input checked="" type="checkbox"/> 12 Diversity, Equity, or Inclusion | <input checked="" type="checkbox"/> 25 Parks, Recreation, Libraries, or Museums | <input type="checkbox"/> 37 OTHER _____ |
| <input checked="" type="checkbox"/> 13 Economic Development | | |

**Austin Lobby Quarterly Activity Report Client
Identity, Compensation or Reimbursement****FORM QAR
SCHEDULE Client Compensation**

1 LOBBYIST NAME Bingham Jr., Alfred		2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 1/8 Rpt: 3/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.		
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI		
	LAST; SUFFIX Reagan National Advertising, Inc.		
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP 7301 Burleson Road		
	Austin, TX 78744		
7 NATURE OF CLIENT'S BUSINESS	Outdoor Advertising		

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENT FOR LOBBYING	<input type="checkbox"/> \$ 0	<input type="checkbox"/> \$ 50,000 - \$ 99,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999
	<input type="checkbox"/> LESS THAN \$10,000	<input type="checkbox"/> \$ 100,000 - \$ 199,999	<input type="checkbox"/> \$ 500,000 or MORE
	<input checked="" type="checkbox"/> \$ 10,000 - \$ 24,999	<input type="checkbox"/> \$ 200,000 - \$ 299,999	(Exact Amount \$ _____)
	<input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 300,000 - \$ 399,999	
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

Austin Lobby Quarterly Activity Report Client Identity, Compensation or Reimbursement

FORM QAR
SCHEDULE Client Compensation

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 2/8 Rpt: 4/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.	
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI LAST; SUFFIX CPS HR	
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP 2450 Del Paso Road, #220 Sacramento, CA 95834	
7 NATURE OF CLIENT'S BUSINESS	Human resources consulting / training	

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENT FOR LOBBYING	<input type="checkbox"/> \$ 0 <input checked="" type="checkbox"/> LESS THAN \$10,000 <input type="checkbox"/> \$ 10,000 - \$ 24,999 <input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 50,000 - \$ 99,999 <input type="checkbox"/> \$ 100,000 - \$ 199,999 <input type="checkbox"/> \$ 200,000 - \$ 299,999 <input type="checkbox"/> \$ 300,000 - \$ 399,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999 <input type="checkbox"/> \$ 500,000 or MORE (Exact Amount \$ _____)
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

**Austin Lobby Quarterly Activity Report Client
Identity, Compensation or Reimbursement****FORM QAR
SCHEDULE Client Compensation**

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 3/8 Rpt: 5/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.	
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI LAST; SUFFIX Ferrovial Airports Holdings US Corp.	
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP 9600 Great Hills Trail, #250 Austin, TX 78759	
7 NATURE OF CLIENT'S BUSINESS	Airport development	

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENTFOR LOBBYING	<input type="checkbox"/> \$ 0 <input type="checkbox"/> LESS THAN \$10,000 <input checked="" type="checkbox"/> \$ 10,000 - \$ 24,999 <input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 50,000 - \$ 99,999 <input type="checkbox"/> \$ 100,000 - \$ 199,999 <input type="checkbox"/> \$ 200,000 - \$ 299,999 <input type="checkbox"/> \$ 300,000 - \$ 399,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999 <input type="checkbox"/> \$ 500,000 or MORE (Exact Amount \$ _____)
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

**Austin Lobby Quarterly Activity Report Client
Identity, Compensation or Reimbursement****FORM QAR
SCHEDULE Client Compensation**

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 4/8 Rpt: 6/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.	
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI LAST; SUFFIX Austin EMS Association	
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP 310 Comal Building A, #239 Apt 804 Austin, TX 78702	
7 NATURE OF CLIENT'S BUSINESS	Trade association	

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENT FOR LOBBYING	<input type="checkbox"/> \$ 0 <input checked="" type="checkbox"/> LESS THAN \$10,000 <input type="checkbox"/> \$ 10,000 - \$ 24,999 <input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 50,000 - \$ 99,999 <input type="checkbox"/> \$ 100,000 - \$ 199,999 <input type="checkbox"/> \$ 200,000 - \$ 299,999 <input type="checkbox"/> \$ 300,000 - \$ 399,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999 <input type="checkbox"/> \$ 500,000 or MORE (Exact Amount \$ _____)
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

**Austin Lobby Quarterly Activity Report Client
Identity, Compensation or Reimbursement****FORM QAR
SCHEDULE Client Compensation**

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 5/8 Rpt: 7/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.	
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI	
	LAST; SUFFIX Vivent Health	
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP 7215 Cameron Rd.	
	Austin, TX 78752	
7 NATURE OF CLIENT'S BUSINESS	Health and Wellness	

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENT FOR LOBBYING	<input checked="" type="checkbox"/> \$ 0	<input type="checkbox"/> \$ 50,000 - \$ 99,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999
	<input type="checkbox"/> LESS THAN \$10,000	<input type="checkbox"/> \$ 100,000 - \$ 199,999	<input type="checkbox"/> \$ 500,000 or MORE
	<input type="checkbox"/> \$ 10,000 - \$ 24,999	<input type="checkbox"/> \$ 200,000 - \$ 299,999	(Exact Amount \$ _____)
	<input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 300,000 - \$ 399,999	
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

**Austin Lobby Quarterly Activity Report Client
Identity, Compensation or Reimbursement****FORM QAR
SCHEDULE Client Compensation**

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 6/8 Rpt: 8/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.	
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI	
	LAST; SUFFIX Capital Tagging	
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP 5119 E. 7th Street	
	Austin, TX 78702	
7 NATURE OF CLIENT'S BUSINESS	Parking enforcement	

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENT FOR LOBBYING	<input type="checkbox"/> \$ 0	<input type="checkbox"/> \$ 50,000 - \$ 99,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999
	<input checked="" type="checkbox"/> LESS THAN \$10,000	<input type="checkbox"/> \$ 100,000 - \$ 199,999	<input type="checkbox"/> \$ 500,000 or MORE
	<input type="checkbox"/> \$ 10,000 - \$ 24,999	<input type="checkbox"/> \$ 200,000 - \$ 299,999	(Exact Amount \$ _____)
	<input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 300,000 - \$ 399,999	
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

**Austin Lobby Quarterly Activity Report Client
Identity, Compensation or Reimbursement****FORM QAR
SCHEDULE Client Compensation**

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 7/8 Rpt: 9/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.	
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI LAST; SUFFIX Austin Parks Foundation	
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP P.O. Box 6160 Austin Austin, TX 78762	
7 NATURE OF CLIENT'S BUSINESS	Parks conservancy and maintenance	

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENT FOR LOBBYING	<input type="checkbox"/> \$ 0 <input checked="" type="checkbox"/> LESS THAN \$10,000 <input type="checkbox"/> \$ 10,000 - \$ 24,999 <input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 50,000 - \$ 99,999 <input type="checkbox"/> \$ 100,000 - \$ 199,999 <input type="checkbox"/> \$ 200,000 - \$ 299,999 <input type="checkbox"/> \$ 300,000 - \$ 399,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999 <input type="checkbox"/> \$ 500,000 or MORE (Exact Amount \$ _____)
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

**Austin Lobby Quarterly Activity Report Client
Identity, Compensation or Reimbursement****FORM QAR
SCHEDULE Client Compensation**

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 8/8 Rpt: 10/15
4 I REPRESENT NO CLIENTS	<input type="checkbox"/> I represented no clients during the applicable reporting period.	
5 CLIENT OR ORGANIZATION NAME	TITLE; FIRST; MI LAST; SUFFIX VillageMD	
6 CLIENT OR ORGANIZATION ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY; STATE; ZIP 125 S. Clark Street, Suite 900 Chicago, IL 60603	
7 NATURE OF CLIENT'S BUSINESS	Healthcare	

COMPENSATION OR REIMBURSEMENT

8 LEVEL OF COMPENSATION OR REIMBURSEMENT FOR LOBBYING	<input checked="" type="checkbox"/> \$ 0 <input type="checkbox"/> LESS THAN \$10,000 <input type="checkbox"/> \$ 10,000 - \$ 24,999 <input type="checkbox"/> \$ 25,000 - \$ 49,999	<input type="checkbox"/> \$ 50,000 - \$ 99,999 <input type="checkbox"/> \$ 100,000 - \$ 199,999 <input type="checkbox"/> \$ 200,000 - \$ 299,999 <input type="checkbox"/> \$ 300,000 - \$ 399,999	<input type="checkbox"/> \$ 400,000 - \$ 499,999 <input type="checkbox"/> \$ 500,000 or MORE (Exact Amount \$ _____)
9 REASON OF DECLINE/REFUSE TO REPORT COMPENSATION OR REIMBURSEMENT	<input type="checkbox"/> Declined or Refused to report compensation or reimbursement		

Austin Lobby Quarterly Activity Report Employees and Associates

FORM QAR
Employee and Associate

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 1/1 Rpt: 11/15
4 NAME OF EMPLOYEE	Quintana, LaRessa (Miss)	
5 BUSINESS ADDRESS	1212 Guadalupe St., 804 Austin, TX 78701	
6 OCCUPATION	Associate	

Austin Lobby Quarterly Activity Report Statement of No Activity-Lobbyists

Statement of No Activity

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Municipla Question: Sch: 1/1 Rpt: 12/15
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This information serves as the electronic signature of the person legally responsible for filing this report.

Lobbyists or registrants who have no reportable activity for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the No Activity Confirmation, I affirm that I have no reportable activity during this reporting period, as defined by the conditions below.

I received no Client Compensation or Reimbursement during this reporting period (Section 4-8-6(A)(2)).

I made no Expenditure for lobbying during this reporting period (Section 4-8-6(A)(3)).

I have not exchanged money, goods, services, or anything of value in the amount of \$500 or more with a business entity in which a City official is a proprietor, partner, director, officer, manager, employer, employee, or in which a City official has a substantial economic interest (Section 4-8-6(A)(4)).

I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (Section 4-8-6(A)(4)).

I have no registration information to update (Section 4-8-5 and 4-8-6(A)(1)).

☐ I have read the conditions above and confirm that I have no reportable activity to disclose during the reporting period

Alfred Bingham Jr.

Signature of Filer

Austin Lobby Quarterly Activity Report Expenditure Totals

FORM QAR
SCHEDULE Expenditure Totals

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Expenditure Totals: Sch: 1/1 Rpt: 13/15																				
4 EXPENDITURE TOTALS	<table><tr><td>Reimbursements to Others</td><td>\$</td></tr><tr><td>Food & Beverages</td><td>\$</td></tr><tr><td>Transportation & Lodging</td><td>\$</td></tr><tr><td>Gifts</td><td>\$</td></tr><tr><td>Entertainment</td><td>\$</td></tr><tr><td>Awards & Mementos</td><td>\$</td></tr><tr><td>Honorariums</td><td>\$</td></tr><tr><td>Made for the Attendance of Council Members at Charitable Events or Fundraisers</td><td>\$</td></tr><tr><td>Media Communications</td><td>\$</td></tr><tr><td>Payments to Persons Assisting with Media Communications (Political Strategists, Pollsters, Consultants, etc.)</td><td>\$</td></tr></table>		Reimbursements to Others	\$	Food & Beverages	\$	Transportation & Lodging	\$	Gifts	\$	Entertainment	\$	Awards & Mementos	\$	Honorariums	\$	Made for the Attendance of Council Members at Charitable Events or Fundraisers	\$	Media Communications	\$	Payments to Persons Assisting with Media Communications (Political Strategists, Pollsters, Consultants, etc.)	\$
Reimbursements to Others	\$																					
Food & Beverages	\$																					
Transportation & Lodging	\$																					
Gifts	\$																					
Entertainment	\$																					
Awards & Mementos	\$																					
Honorariums	\$																					
Made for the Attendance of Council Members at Charitable Events or Fundraisers	\$																					
Media Communications	\$																					
Payments to Persons Assisting with Media Communications (Political Strategists, Pollsters, Consultants, etc.)	\$																					

Austin Lobby Quarterly Activity Report Termination Notice
Lobbyist Quarterly Activity Report

1 LOBBYIST NAME Bingham Jr., Alfred	2 LOBBYIST ID 00090617	3 Total pages Schedule Report Termination: Sch: 1/1 Rpt: 14/15
4 TERMINATING REPORT	<input type="checkbox"/> Terminate your registration with this activity report	

Austin Lobby Quarterly Activity Report File Declaration-Lobbyist

Lobby Activity

AFFIDAVIT

This information serves as the electronic signature of the person legally responsible for filing this report.

Under penalty of perjury, I swear or affirm that the facts provided in this report are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code Chapter 4-8.

I understand that pursuant to Section 4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

Alfred Bingham Jr.

Signature of Filer